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CURRENT CORRESPONDE	ENCE ADDRESS: (Note: U	Jse Block 1 for any char	nge of addres	s)	Note: A certifica	te of mailing can	only be use	d for domestic mailings of	
LAW OFFICE OF MICHAEL A. SANZO, LLC 15400 CALHOUN DRIVE SUITE 125 ROCKVILLE, MD. 20855 (Customer number 66991)					the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.				
								(Signature)	
						T		(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVENT			R	ATTORNEY DO	OCKET NO.	CONFIRMATION NO.	
10/593,119 09/18/2006			Renate Schulze			7601/88256 5922			
TITLE OF INVENTION:	NOVEL ALCOHOL	. DEHYDROGENA	SES						
APPLN. TYPE			ISSUE FEE		BLICATION FEE	TOTAL FEE(S) DUE		DATE DUE	
nonprovisional	NO	\$151	0		\$300	\$18° -	10	12/30/2009	
EXAMINER		ART UNIT		CLASS-SUBCLASS					
SAIDHA, TEKCHAND		1652		43	5-250000				
1. Change of corresponder (37 CFR 1.363).	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, 1 Law Office of:								
Change of correspondence Ad-	dress form PTO/SB/122			_	s OK, afternatively single firm (having		2 Michael	A Sanza II C	
□ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. □ "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent form PTO/SB/47			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME AN				,					
for recordation as set for	rth in 37 CFR 3.11. Co	ed below, no assigne mpletion of this form	ı is NOT a s	substitute	for filing an assig	nment.		ne document has been filed	
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Degussa AG			Dusseldorf, Germany						
Please check the appropriate a	assignee category or catego	ries (will not be printed	on the paten	ıt):	☐ Individual	☑ Corporation of	r other private	group entity Government	
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a. Applicant claims	SMALL ENTITY status	s. See 37 CFR 1.27.	☐ b. A	applicant	is no longer claim	ing SMALL ENT	TTY status. S	ee 37 CFR 1.27(g)(2).	
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Authorized Signature /Michael A. Sanzo/					Date	De	cember 27,	2009	
Typed or printed name	Mi	chael A. Sanzo			Registra	ation No.	36,9	912	
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